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United States Bankruptcy Court Northern District of Illinois					Vol	untary Petition		
Name of Debtor (if individual, enter Last, First, Thomas, Robert	Middle):			of Joint De omas, Do	ebtor (Spouse bllie	) (Last, First,	, Middle):	
All Other Names used by the Debtor in the last 8 (include married, maiden, and trade names):	years				used by the J maiden, and			years
Last four digits of Soc. Sec. or Individual-Taxpa (if more than one, state all)	yer I.D. (ITIN)/Comp	olete EIN	(if more	than one, state	all)	Individual-T	Гахрауег I.I	D. (ITIN) No./Complete EIN
xxx-xx-5692 Street Address of Debtor (No. and Street, City, a 200 Nobes Ave Lockport, IL		ZIP Code	Street 200	Address of Nobes A kport, IL	Joint Debtor <b>Ave</b>	(No. and Str	reet, City, an	ZIP Code
County of Residence or of the Principal Place of		60441	·	•	ence or of the	Principal Pla	ace of Busir	60441 ness:
Will  Mailing Address of Debtor (if different from stre	et address):		Mailin		of Joint Debt	or (if differen	nt from stree	et address):
	Г	ZIP Code	_					ZIP Code
Location of Principal Assets of Business Debtor (if different from street address above):			•					,
Type of Debtor (Form of Organization) (Check one box)		f Business one box)				of Bankrup Petition is Fi		Inder Which
<ul> <li>Individual (includes Joint Debtors)         See Exhibit D on page 2 of this form.</li> <li>□ Corporation (includes LLC and LLP)</li> <li>□ Partnership</li> <li>□ Other (If debtor is not one of the above entities, check this box and state type of entity below.)</li> </ul>	☐ Health Care Bus ☐ Single Asset Re in 11 U.S.C. § 1 ☐ Railroad ☐ Stockbroker ☐ Commodity Bro ☐ Clearing Bank ☐ Other	siness al Estate as d 01 (51B)	efined	Chapt Chapt Chapt Chapt Chapt Chapt	er 7 er 9 er 11 er 12	☐ Cl of ☐ Cl of	napter 15 Pe a Foreign M napter 15 Pe a Foreign M	etition for Recognition Main Proceeding etition for Recognition Nonmain Proceeding
Chapter 15 Debtors  Country of debtor's center of main interests:  Each country in which a foreign proceeding by, regarding, or against debtor is pending:	Tax-Exer	he United State	defined in 11 U.S.C. § 101(8) as business debts.  "incurred by an individual primarily for			☐ Debts are primarily business debts.		
Filing Fee (Check one box)  Full Filing Fee attached  Filing Fee to be paid in installments (applicable to a attach signed application for the court's consideratic debtor is unable to pay fee except in installments. Form 3A.	individuals only). Must on certifying that the dule 1006(b). See Offici	al De Check if: De are Check all	btor is a sn btor is not btor's aggr less than S applicable	regate nonco \$2,490,925 (as boxes:	debtor as defir ness debtor as on ntingent liquida amount subject	lefined in 11 U	C. § 101(51D J.S.C. § 101(5 cluding debts	·
Filing Fee waiver requested (applicable to chapter attach signed application for the court's consideration		B. Ac	ceptances of	of the plan w	this petition. vere solicited pr 3.C. § 1126(b).	repetition from	one or more	classes of creditors,
Statistical/Administrative Information  ☐ Debtor estimates that funds will be available ☐ Debtor estimates that, after any exempt proper there will be no funds available for distribution	erty is excluded and a	administrativ		es paid,		THIS	SPACE IS F	OR COURT USE ONLY
1- 50- 100- 200- 1	,000- 5,001- 5,000 10,000	10,001- 2	] 25,001- 60,000	50,001- 100,000	OVER 100,000			
\$0 to \$50,001 to \$100,001 to \$500,001 \$ \$50,000 \$100,000 \$500,000 to \$1 to	51,000,001 \$10,000,001 to \$10 to \$50 nillion million	\$50,000,001 \$ to \$100 to	100,000,001 5 \$500 nillion	\$500,000,001 to \$1 billion	More than \$1 billion			
\$\overline{\sigma}\$ to \$\$50,001 to \$100,001 to \$500,001 \$\$ \$\$50,000 \$100,000 \$500,000 to \$1\$ \$\$t\$	1,000,001 \$10,000,001 to \$50 pillion million	\$50,000,001 \$ to \$100 to	100,000,001 c \$500		More than \$1 billion			

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Page 2 Name of Debtor(s): **Voluntary Petition** Thomas, Robert Thomas, Dollie (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Location Case Number: Date Filed: Where Filed: - None -Location Case Number: Date Filed: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I forms 10K and 10Q) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. X /s/ Joseph Weiler March 9, 2015 Signature of Attorney for Debtor(s) (Date) Joseph Weiler 6301154 Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ■ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).

Page 3 of 54 Document **B1** (Official Form 1)(04/13)

#### **Voluntary Petition**

(This page must be completed and filed in every case)

#### Signatures

#### Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

#### ▼ /s/ Robert Thomas

Signature of Debtor Robert Thomas

#### X /s/ Dollie Thomas

Signature of Joint Debtor Dollie Thomas

Telephone Number (If not represented by attorney)

#### March 9, 2015

Date

#### Signature of Attorney\*

#### X /s/ Joseph Weiler

Signature of Attorney for Debtor(s)

#### Joseph Weiler 6301154

Printed Name of Attorney for Debtor(s)

#### Robert J. Semrad & Associates, LLC

Firm Name

20 S. Clark Street 28th Floor Chicago, IL 60603

Address

#### Email: rsemrad@robertjsemrad.com (312) 913 0625 Fax: (312) 913 0631

Telephone Number

### March 9, 2015

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

#### Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

#### Signature of a Foreign Representative

Page 3

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

Name of Debtor(s):

Thomas, Robert Thomas, Dollie

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

7	V
7	١

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

#### Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

•	7	

Date

Address

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

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B 1D (Official Form 1, Exhibit D) (12/09)

#### United States Bankruptcy Court Northern District of Illinois

In re	Robert Thomas Dollie Thomas		Case No.	
		Debtor(s)	Chapter	7

# EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

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B 1D (Official Form 1, Exhibit D) (12/09) - Cont.  Page 2
□ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.] □ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.); □ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.); □ Active military duty in a military combat zone.
☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.
I certify under penalty of perjury that the information provided above is true and correct.
Signature of Debtor: /s/ Robert Thomas  Robert Thomas
Date: March 9, 2015

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B 1D (Official Form 1, Exhibit D) (12/09)

#### United States Bankruptcy Court Northern District of Illinois

In re	Robert Thomas Dollie Thomas		Case No.	
		Debtor(s)	Chapter	7

# EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] \_\_\_\_

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

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B 1D (Official Form 1, Exhibit D) (12/09) - Cont.	Page 2
☐ 4. I am not required to receive a credit cou	inseling briefing because of: [Check the applicable
statement.] [Must be accompanied by a motion for a	letermination by the court.]
☐ Incapacity. (Defined in 11 U.S.C. §	§ 109(h)(4) as impaired by reason of mental illness or
mental deficiency so as to be incapable of rea	alizing and making rational decisions with respect to
financial responsibilities.);	
☐ Disability. (Defined in 11 U.S.C. §	109(h)(4) as physically impaired to the extent of being
unable, after reasonable effort, to participate	in a credit counseling briefing in person, by telephone, or
through the Internet.);	
☐ Active military duty in a military c	ombat zone.
☐ 5. The United States trustee or bankruptcy requirement of 11 U.S.C. § 109(h) does not apply in	administrator has determined that the credit counseling this district.
I certify under penalty of perjury that the	information provided above is true and correct.
Signature of Debtor:	/s/ Dollie Thomas
C	Dollie Thomas
Date: March 9, 2015	

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B6 Summary (Official Form 6 - Summary) (12/14)

# **United States Bankruptcy Court Northern District of Illinois**

In re	Robert Thomas,		Case No.	
	Dollie Thomas			
-		Debtors	Chapter	7

#### **SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	0.00		
B - Personal Property	Yes	3	4,375.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		0.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	12		35,414.08	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			1,490.00
J - Current Expenditures of Individual Debtor(s)	Yes	2			2,301.00
Total Number of Sheets of ALL Schedu	ıles	25			
	Te	otal Assets	4,375.00		
			Total Liabilities	35,414.08	

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B 6 Summary (Official Form 6 - Summary) (12/14)

# **United States Bankruptcy Court Northern District of Illinois**

In re	Robert Thomas,		Case No.		
	Dollie Thomas				
_		, Debtors	Chapter	7	_

### STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	0.00

#### State the following:

Average Income (from Schedule I, Line 12)	1,490.00
Average Expenses (from Schedule J, Line 22)	2,301.00
Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14)	1,490.00

#### State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY"     column		0.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		35,414.08
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		35,414.08

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B6A (Official Form 6A) (12/07)

In re	Robert Thomas,	Case No.
	Dollie Thomas	

**Debtors** 

#### **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property

Nature of Debtor's Interest in Property Husband, Wife, Joint, or Community Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption

Amount of Secured Claim

None

Sub-Total > **0.00** (Total of this page)

Total > **0.00** 

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B6B (Official Form 6B) (12/07)

In re	Robert Thomas,	Case No.
	Dollie Thomas	

Debtors

#### **SCHEDULE B - PERSONAL PROPERTY**

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O Description and Location of Propert E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
1.	Cash on hand	X		
2.	Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	X		
3.	Security deposits with public utilities, telephone companies, landlords, and others.	Residential Lease Security Deposit	J	750.00
4.	Household goods and furnishings, including audio, video, and computer equipment.	Used Furniture	J	450.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X		
6.	Wearing apparel.	Used Clothes	J	500.00
7.	Furs and jewelry.	Wedding Bands	J	2,000.00
8.	Firearms and sports, photographic, and other hobby equipment.	x		
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X		
10.	Annuities. Itemize and name each issuer.	X		
			Sub-Tota (Total of this page)	al > <b>3,700.00</b>

2 continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

In r	e Robert Thomas, Dollie Thomas			Case No	•	
		SCHEDUL	Debtors  LE B - PERSONAL PROP  (Continuation Sheet)	PERTY		
	Type of Property	N O N E	Description and Location of Prope	erty	usband, Wife, oint, or nmunity	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X				
	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X				
;	Stock and interests in incorporated and unincorporated businesses. Itemize.	X				
	Interests in partnerships or joint ventures. Itemize.	X				
:	Government and corporate bonds and other negotiable and nonnegotiable instruments.	X				
16.	Accounts receivable.	X				
]	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X				
	Other liquidated debts owed to debtor including tax refunds. Give particulars.					
(	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X				
j	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X				
1	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X				
				(Total of th	Sub-Tota	al > <b>0.00</b>

Sheet <u>1</u> of <u>2</u> continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

In re	Robert Thomas,	Case No
	Dollie Thomas	

#### Debtors

#### **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
22.	Patents, copyrights, and other intellectual property. Give particulars.	X			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and other vehicles and accessories.	19	998 Buick Century-185,000 Miles	J	675.00
26.	Boats, motors, and accessories.	X			
27.	Aircraft and accessories.	X			
28.	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.	X			
30.	Inventory.	X			
31.	Animals.	X			
32.	Crops - growing or harvested. Give particulars.	X			
33.	Farming equipment and implements.	X			
34.	Farm supplies, chemicals, and feed.	X			
35.	Other personal property of any kind not already listed. Itemize.	X			

Sub-Total > 675.00 (Total of this page)

Total >

4,375.00

Sheet **2** of **2** continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

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B6C (Official Form 6C) (4/13)

_		
In re	Robert Thomas,	Case No
	Dollie Thomas	

Debtors

#### SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:

(Check one box)

11 U.S.C. §522(b)(2)

11 U.S.C. §522(b)(3)

Check if debtor claims a homestead exemption that exceeds \$155,675. (Amount subject to adjustment on 4/1/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.)

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Security Deposits with Utilities, Landlords, and Oth Residential Lease Security Deposit	ners 735 ILCS 5/12-1001(b)	750.00	750.00
Household Goods and Furnishings Used Furniture	735 ILCS 5/12-1001(b)	450.00	450.00
Wearing Apparel Used Clothes	735 ILCS 5/12-1001(a)	500.00	500.00
<u>Furs and Jewelry</u> Wedding Bands	735 ILCS 5/12-1001(b)	2,000.00	2,000.00
<u>Automobiles, Trucks, Trailers, and Other Vehicles</u> 1998 Buick Century-185,000 Miles	735 ILCS 5/12-1001(c)	675.00	1,350.00

Total: 4,375.00 5,050.00

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B6D (Official Form 6D) (12/07)

In re	Robert Thomas,	Case No.
	Dollie Thomas	

Debtors

#### SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Unliquidated". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

	_		*					
CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	СОПШВНОК	Hu H C	sband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED,  NATURE OF LIEN, AND  DESCRIPTION AND VALUE  OF PROPERTY  SUBJECT TO LIEN	COZF_ZGшZF	UNLIQUIDA	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No.				Т	A T E D			
			Value \$		D			
Account No.			value \$	$\dashv$		Н		
Account No.			Value \$					
Account No.			value \$	$\dashv$		Н		
			Value \$					
Account No.								
			Value \$					
continuation sheets attached			S (Total of th	ubto is p				
			(Percent on Sun		ota	- 1	0.00	0.00
			(Report on Summary of Sch	ned	ule	s) [		

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B6E (Official Form 6E) (4/13)

In re	Robert Thomas,		Case No.
	Dollie Thomas		
-		Debtors	

#### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

■ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
☐ Domestic support obligations
Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relation of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
☐ Extensions of credit in an involuntary case
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of trustee or the order for relief. 11 U.S.C. § 507(a)(3).
☐ Wages, salaries, and commissions
Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sale representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
☐ Contributions to employee benefit plans
Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
☐ Certain farmers and fishermen
Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
☐ Deposits by individuals
Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
☐ Taxes and certain other debts owed to governmental units
Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
☐ Commitments to maintain the capital of an insured depository institution
Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
☐ Claims for death or personal injury while debtor was intoxicated
Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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B6F (Official Form 6F) (12/07)

In re	Robert Thomas,		Case No.	
	Dollie Thomas			
		Debtors		

#### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	H W J		CONTINGENT	UNLIQUID	DISPUTED	AMOUNT OF CLAIM
Account No. 3-0721-6023568			Unsecured Debt	N     T	D A T E	1	
Allied Waste Services 808 S Joliet St Joliet, IL 60436		J			D		
Account No. xxx3735			Opened 6/01/13				284.78
Atg Credit 1700 W Cortland St Ste 2 Chicago, IL 60622		w	Collection Attorney Joliet Radiological S.C.				
Account No. xx3118			Onemad 5/04/44		-	-	407.00
Atg Credit 1700 W Cortland St Ste 2 Chicago, IL 60622		н	Opened 6/01/11 Collection Attorney Rush Copley Ent				
A			On a mark 44 /04 /44				72.00
Account No. xx2440  Atg Credit 1700 W Cortland St Ste 2 Chicago, IL 60622		н	Opened 11/01/11 Collection Attorney Rush Copley Ent				58.00
			(Total of	Sub	tota	l al	821.78

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B6F (Official Form 6F) (12/07) - Cont.

In re	Robert Thomas,	Case No.
	Dollie Thomas	

	16	Į.i	shand Wife Joint or Community	1.	1	Ь	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Hu H W J C	band, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	UNLIQUIDAT	DISPUTED	AMOUNT OF CLAIM
Account No. xxxxxxxx6356			Opened 8/01/12	T	E		
Cda/pontiac Attn:Bankruptcy Po Box 213 Streator, IL 61364		w	Collection Attorney Heartland Cardiovascular Cente		D		1,217.00
Account No. xxxxxxxx2026	t		Opened 7/01/10	$\dagger$	T		
Cda/pontiac Attn:Bankruptcy Po Box 213 Streator, IL 61364		н	Collection Attorney Dephillips M.D.Dr George E				851.00
4540	_		0 1 0/04/40	+	$\vdash$		031.00
Account No. xxxxxxxx4542  Cda/pontiac Attn:Bankruptcy Po Box 213 Streator, IL 61364		w	Opened 9/01/13 Collection Attorney Heartland Cardiovascular Cente				387.00
Account No. xxxxxxxx9766	╁		Opened 10/01/12	+	$\vdash$	$\vdash$	
Cda/pontiac Attn:Bankruptcy Po Box 213 Streator, IL 61364		w	Collection Attorney Midwest Rehabilitation Assoc.				352.00
Account No. xxxxxxxx6720	╁		Opened 5/01/13	+	+		
Cda/pontiac Attn:Bankruptcy Po Box 213 Streator, IL 61364		н	Collection Attorney Parkview Orthopedic Group				154.00
Sheet no1 of _11_ sheets attached to Schedule of				Sub	tetr	1	
Creditors Holding Unsecured Nonpriority Claims			(Total of				2,961.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Robert Thomas,	Case No.
	Dollie Thomas	

	1	Ц.	sband, Wife, Joint, or Community	T_	10	Г	Γ
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	COZHLZGEZ	L Q	DISPUTED	AMOUNT OF CLAIM
Account No. xxxxxxxx2997			Opened 3/01/13	٦٠	T E		
Cda/pontiac Attn:Bankruptcy Po Box 213 Streator, IL 61364		w	Collection Attorney Heartland Cardiovascular Cente		D		108.00
Account No. xxxxxxxxxxxxx0511	t	H	Opened 11/01/14	$^{+}$	t		
Coast to Coast Financia Attn:Bankruptcy 101 Hodencamp Rd Ste 120 Thousand Oaks, CA 91360		w	Collection Attorney Republic Services #721				284.00
Account No.	1		Electric Bill	$\dagger$	t		
Commonwealth Edison 3 Lincoln Center 4th Floor Attn Bankruptcy Section Oakbrook Terrace, IL 60181		J					9,817.18
Account No. xxxx8012	1		Opened 8/01/14	$\dagger$	t		
Credit Management Lp 4200 International Pkwy Carrollton, TX 75007		w	Collection Attorney Comcast-Chicago				232.00
Account No. xxx6303	+	$\vdash$	Opened 8/01/12	+	+	+	
Credtrs Coll Po Box 63 Kankakee, IL 60901		w	Collection Attorney Presence Home Care				4 255 00
				$\perp$			1,255.00
Sheet no. <b>_2</b> of <b>_11</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims	•		(Total of	Sub this			11,696.18

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B6F (Official Form 6F) (12/07) - Cont.

In re	Robert Thomas,	Case No.
	Dollie Thomas	

	1	ш	sband, Wife, Joint, or Community	T	111	<u> </u>	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	UNLLQULDAH	DISPUTED	AMOUNT OF CLAIM
Account No. xxx0550			Opened 8/01/12	] ⊤	E		
Credtrs Coll Po Box 63 Kankakee, IL 60901		w	Collection Attorney Associate Pathologists Of Joli		D		270.00
Account No. xxx0562	f		Opened 8/01/12	$\vdash$		H	
Credtrs Coll Po Box 63 Kankakee, IL 60901		w	Collection Attorney Associate Pathologists Of Joli				
							240.00
Account No. xxx0556  Credtrs Coll Po Box 63 Kankakee, IL 60901		w	Opened 8/01/12 Collection Attorney Associate Pathologists Of Joli				
							216.00
Account No. xxx0533  Credtrs Coll Po Box 63 Kankakee, IL 60901		w	Opened 8/01/12 Collection Attorney Associate Pathologists Of Joli				
				ot			204.00
Account No. xxx3987  Credtrs Coll Po Box 63  Kankakee, IL 60901		н	Opened 10/01/10 Collection Attorney Associated Radiologists Of Jol				201.00
Sheet no. <b>3</b> of <b>11</b> sheets attached to Schedule of				Subt	tota	ıl	
Creditors Holding Unsecured Nonpriority Claims			(Total of the				1,131.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Robert Thomas,	Case No.
	Dollie Thomas	

	16	I	ahand Wife Isint as Community	T.	1	<u> </u>	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	LIO	DISPUTED	AMOUNT OF CLAIM
Account No. xxx0564			Opened 8/01/12	] ⊤	ΙĖ		
Credtrs Coll Po Box 63 Kankakee, IL 60901		w	Collection Attorney Associate Pathologists Of Joli		D		192.00
Account No. xxx0779	+		Opened 10/01/13	╁			
Credtrs Coll Po Box 63 Kankakee, IL 60901		w	Collection Attorney Associated Radiologists Of Jol				
							115.00
Account No. xxx0554  Credtrs Coll Po Box 63 Kankakee, IL 60901		w	Opened 8/01/12 Collection Attorney Associate Pathologists Of Joli				
	┸			$oxed{\bot}$			115.00
Account No. xxx0582  Credtrs Coll Po Box 63 Kankakee, IL 60901		w	Opened 8/01/12 Collection Attorney Associate Pathologists Of Joli				99.00
Account No. xxx0581	╀		Opened 8/01/12	$\vdash$	$\vdash$	$\vdash$	33.00
Credtrs Coll Po Box 63 Kankakee, IL 60901		w	Collection Attorney Associate Pathologists Of Joli				99.00
Sheet no4 of _11_ sheets attached to Schedule of				Subt	l tots	1	
Creditors Holding Unsecured Nonpriority Claims			(Total of the				620.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Robert Thomas,	Case No.
	Dollie Thomas	

CREDITOR'S NAME,	CO	Hu	sband, Wife, Joint, or Community	CO	U	P	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER	DEBTOR	H W J	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM	N T I	DZLLQD.	S P U T	AMOUNT OF CLAIM
(See instructions above.)	O R	С	IS SUBJECT TO SETOFF, SO STATE.	ZGHZH	l b		
Account No. xxx0577	t		Opened 8/01/12	T N	A T		
	1		Collection Attorney Associate Pathologists Of	L	E D		
Credtrs Coll			Joli				
Po Box 63		W					
Kankakee, IL 60901							
							96.00
Account No. xxx0555			Opened 8/01/12		Г		
	1		Collection Attorney Associate Pathologists Of				
Credtrs Coll		l	Joli				
Po Box 63		w					
Kankakee, IL 60901							
							95.00
Account No. xxx0547	T	T	Opened 8/01/12	T			
	1		Collection Attorney Associate Pathologists Of				
Credtrs Coll		l	Joli				
Po Box 63		W					
Kankakee, IL 60901							
							95.00
Account No. xxx0780	╀	├	Opened 10/01/13	$\vdash$	$\vdash$		33.33
Account IVO. AXAO7 OU	ł		Collection Attorney Associated Radiologists				
Credtrs Coll			Of Jol				
Po Box 63		W					
Kankakee, IL 60901							
					L		87.00
Account No. xxx9071			Med1 02 Presence Home Care				
Creative Cell							
Credtrs Coll Po Box 63		н					
Kankakee, IL 60901		ļ.,					
1							
							87.00
Sheet no. <b>5</b> of <b>11</b> sheets attached to Schedule of			<u> </u>	Subt	ota	 1	
Creditors Holding Unsecured Nonpriority Claims			(Total of t				460.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Robert Thomas,	Case No.
	Dollie Thomas	

	1	Į.	shand Wife laint or Community		11	Г	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu H V C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	UNLLQULDAT	DISPUTED	AMOUNT OF CLAIM
Account No. xxx0600	1		Opened 8/01/12	Т	Е		
Credtrs Coll Po Box 63 Kankakee, IL 60901		w	Collection Attorney Associate Pathologists Of Joli		D		84.00
Account No. xxx0570	╁		Opened 8/01/12	$\vdash$		$\vdash$	
Credtrs Coll Po Box 63 Kankakee, IL 60901		w	Collection Attorney Associate Pathologists Of Joli				
							82.00
Account No. xxx0544  Credtrs Coll Po Box 63 Kankakee, IL 60901		w	Opened 8/01/12 Collection Attorney Associate Pathologists Of Joli				
	_						81.00
Account No. xxx0543  Credtrs Coll Po Box 63 Kankakee, IL 60901		w	Opened 8/01/12 Collection Attorney Associate Pathologists Of Joli				81.00
Account No. xxx1524	+		Opened 8/01/12			$\vdash$	01.00
Credtrs Coll Po Box 63 Kankakee, IL 60901		w	Collection Attorney Associate Pathologists Of Joli				75.00
Sheet no. <b>_6</b> of <b>_11</b> sheets attached to Schedule of			<u> </u>	ubi	ota	ıl	
Creditors Holding Unsecured Nonpriority Claims			(Total of the				403.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Robert Thomas,	Case No.
	Dollie Thomas	

	T <sub>C</sub>	ш	sband, Wife, Joint, or Community	I c	111	Ь	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	LLQULD	DISPUTED	AMOUNT OF CLAIM
Account No. xxx0875			Opened 8/01/12	Т	ΙĖ		
Credtrs Coll Po Box 63 Kankakee, IL 60901		w	Collection Attorney Associate Pathologists Of Joli		D		75.00
Account No. xxx0552	T		Opened 8/01/12	$\vdash$		H	
Credtrs Coll Po Box 63 Kankakee, IL 60901		w	Collection Attorney Associate Pathologists Of Joli				
							75.00
Account No.	T		Medical Bill	$\vdash$	H	$\vdash$	
Dr. Udit V Patel 744 Essington Rd Joliet, IL 60435		J					4 000 00
Account No. xxxxxxxxxxx5143	-		Opened 3/27/08 Last Active 7/07/08				4,000.00
Fst Premier 3820 N Louise Ave Sioux Falls, SD 57107		н	Credit Card				445.00
Account No.	+		Medical Bill	$\vdash$		$\vdash$	
Hinsdale Orthopaedics PO Box 5461 Carol Stream, IL 60197		J					005.04
							905.01
Sheet no. <u>7</u> of <u>11</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			S (Total of t	Subt his			5,500.01

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B6F (Official Form 6F) (12/07) - Cont.

In re	Robert Thomas,	Case No.	
	Dollie Thomas		

CREDITORIC NAME	C	Hu	sband, Wife, Joint, or Community	C	U	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	ODEBTOR	J H H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.		UNLLQULDAT	I SPUTED	AMOUNT OF CLAIM
Account No. xxxx2292			Opened 7/01/12	] T	E		
Illinois Collection Service/ICS Illinois Collection Service Po Box 1010 Tinley Park, IL 60477		w	Collection Attorney Joliet Radiological Service C		D		440.00
Account No. xxxxxx1055	┢		Opened 11/01/13	⊢		╀	
Med Business Bureau Po Box 1219 Park Ridge, IL 60068	-	w	Collection Attorney Med1 02 Em Strategies				780.00
Account No. xxxxxx1746  Med Business Bureau Po Box 1219 Park Ridge, IL 60068		w	Opened 11/01/12 Collection Attorney Med1 02 Em Strategies				222.00
	┞		0 1 0/04/40	$\vdash$		_	332.00
Account No. xxxxxxxxxx0003  Med Business Bureau Po Box 1219 Park Ridge, IL 60068		н	Opened 3/01/12 Collection Attorney Med1 02 Orsini Healthcare				
Account No. www.0496	_	_	Onemad 4/04/42	$\vdash$		_	96.00
Account No. xxxx9486  Med Business Bureau Po Box 1219 Park Ridge, IL 60068		Н	Opened 4/01/13 Collection Attorney Med1 02 Em Strategies				84.00
Sheet no. <b>8</b> of <b>11</b> sheets attached to Schedule of		_	<u> </u>	Subi	tota	<u>1</u> ւ1	
Creditors Holding Unsecured Nonpriority Claims			(Total of t				1,732.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Robert Thomas,	Case No.
	Dollie Thomas	

		ш	sband, Wife, Joint, or Community	16	111	Г	<u> </u>
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	L	DISPUTED	AMOUNT OF CLAIM
Account No. xxxx9488			Opened 4/01/13	T	ΙĖ		
Med Business Bureau Po Box 1219 Park Ridge, IL 60068		н	Collection Attorney Med1 02 Em Strategies		D		62.00
Account No.			Medical Bill	$^{+}$	t		
Midwest Hospitals LLC 2100 Glennwood Ave Joliet, IL 60435		J					74.11
Account No. xxxx5690	-		Opened 8/01/12	+	$\vdash$	+	74.11
National Recovery Agen 2491 Paxton St Harrisburg, PA 17111		w	Collection Attorney The Hamilton Collection				42.00
Account No.	1		Gas Bill	+	$\frac{1}{1}$		12.00
Nicor P.O. Box 2020 Aurora, IL 60507		J					3,000.00
Account No. xxxx6967			Med1 02 Presence St Joseph Medical C	+	<u> </u>		3,000.00
Pellettieri 991 Oak Creek Dr Lombard, IL 60148		н	·				
							1,216.00
Sheet no. <b>9</b> of <b>11</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of	Sub this			4,394.11

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B6F (Official Form 6F) (12/07) - Cont.

In re	Robert Thomas,	Case No
	Dollie Thomas	

CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	C	U	Þ	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	ODEBTOR	J M H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	NT I NG E N	NLIQUIDAT	DISPUTED	AMOUNT OF CLAIM
Account No. xx3885			Opened 8/01/14	Т	E		
Vision Financial Servi 1900 W Severs Rd La Porte, IN 46350		w	Collection Attorney Silver Cross Hospital		D		2,211.00
Account No. xx2051	╀		Opened 8/01/13	+	$\vdash$	┢	2,211100
Vision Financial Servi 1900 W Severs Rd La Porte, IN 46350		w	Collection Attorney Silver Cross Hospital				627.00
Account No. xx5082  Vision Financial Servi 1900 W Severs Rd La Porte, IN 46350		w	Opened 12/01/13 Collection Attorney Silver Cross Hospital				
Account No.	╀		Notice Only	+			399.00
World Acceptance Corporation 2637 S. Cooper St Arlington, TX 76015		J	House Only				1.00
Account No. xxxxxxxx6601	$\vdash$	$\vdash$	Opened 1/01/13 Last Active 4/03/13	+	$\vdash$		
World Finance Corp 1591 Sycamore Rd Yorkville, IL 60560		н	Secured				1,404.00
Sheet no10_ of _11_ sheets attached to Schedule of			<u> </u>	Sub	L tota	<u>1</u> ւ1	·
Creditors Holding Unsecured Nonpriority Claims			(Total of				4,642.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Robert Thomas,	Case No.
	Dollie Thomas	

	16	1	should Wife laint as Community	T_	1	15		
CREDITOR'S NAME,	ŏ		sband, Wife, Joint, or Community	<b>-</b>  6	N	۱۲	Ή.	
MAILING ADDRESS	C O D E B T O R	Н	DATE CLAIM WAS INCURRED AND	N T	ŀ	DISPUT		
INCLUDING ZIP CODE, AND ACCOUNT NUMBER	В	W	CONSIDERATION FOR CLAIM. IF CLAIM		Q	Ų	!	AMOUNT OF CLAIM
(See instructions above.)	Ö	c	IS SUBJECT TO SETOFF, SO STATE.	N G E N T	Ĭ	=		AMOUNT OF CLAIM
(See instructions above.)	R			_	D A T	D	Ľ	
Account No. xxxxxxxx8901			Opened 4/01/12 Last Active 7/31/12	T	T			
	1		Secured		E D			
World Finance Corp						Г	1	
1591 Sycamore Rd		Н				ı		
Yorkville, IL 60560						ı		
Torkville, iL 00300								
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								0.00
Account No. xxxxxxxx6101	1	t	Opened 1/01/12 Last Active 4/03/12	$\top$		T	T	
Ticcount 110. ARAMANATO I	1		Secured					
Montal Finance Com			occur cu			ı		
World Finance Corp		٦						
1591 Sycamore Rd		Н						
Yorkville, IL 60560						ı		
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Account No. xxxxxxxx6601			Opened 7/01/12 Last Active 1/24/13					
			Secured					
World Finance Corp								
1591 Sycamore Rd		H						
Yorkville, IL 60560						ı		
								0.00
	┖	_		┸	_	L	_	0.00
Account No.			Unsecured Debt					
	1							
World Finance Corporation								
1591 sycamore Rd		J						
Yorkville, IL 60560								
1 01 10 110 110 110 110 110 110 110 110								
								4 050 00
								1,053.00
Account No.				T		T		
	1							
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	1							
Chart no. 11 of 11 shoots attached to California	_	_		Sub	to+-	1	+	
Sheet no. 11 of 11 sheets attached to Schedule of								1,053.00
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pag	ge)	L	, <del>-</del>
				-	Γota	al		
			(Report on Summary of S					35,414.08
			(Acport on Summary of S		uui	10)		-

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B6G (Official Form 6G) (12/07)

In re	Robert Thomas,	Case No.
	Dollie Thomas	

Debtors

#### SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract. Case 15-08196 Doc 1 Filed 03/09/15 Entered 03/09/15 12:45:41 Desc Main Document Page 30 of 54

B6H (Official Form 6H) (12/07)

In re	Robert Thomas,	Case No.
	Dollie Thomas	

Debtors

#### **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

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						_				
Fill	in this information to identify your c	ase:								
Del	otor 1 Robert Thor	mas			_					
	otor 2 Dollie Thom	nas			_					
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS							
	se number lown)		-			☐ Ar		ed filing ent showin	g post-petition	
0	fficial Form B 6I					MI	M / DD/ Y	YYY		
S	chedule I: Your Inc	ome								12/1
	use. If you are separated and you ch a separate sheet to this form.  t1: Describe Employment information.						mber (if	known). A		
	If you have more than one job,		■ Employed				☐ Emplo	oyed	<b>.</b>	
attach a separate page with information about additional		Employment status	☐ Not employed				■ Not e	•		
	employers.	Occupation	Retired/Disable	d						
	Include part-time, seasonal, or self-employed work.	Employer's name								
	Occupation may include student or homemaker, if it applies.	Employer's address								
		How long employed t	here?							
Par	t 2: Give Details About Mor	nthly Income								
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to re	eport for	any	line, write	\$0 in the	space. Inc	clude your no	n-filing
	u or your non-filing spouse have me e space, attach a separate sheet to		ombine the information	n for all e	empl	oyers for t	hat perso	on on the li	nes below. If	you need
						For Deb	tor 1		btor 2 or ng spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,	ry, and commissions (b calculate what the month	efore all payroll ly wage would be.	2.	\$		0.00	\$	0.00	ı
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$	0.00	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$		0.00	\$	0.00	

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**Robert Thomas** Debtor 1 Debtor 2 **Dollie Thomas** Case number (if known) For Debtor 2 or For Debtor 1 non-filing spouse Copy line 4 here 0.00 0.00 List all payroll deductions: Tax, Medicare, and Social Security deductions 5a. 5a. 0.00 0.00 5b. Mandatory contributions for retirement plans 5b. \$ \$ 0.00 0.00 5c. Voluntary contributions for retirement plans 5c. \$ 0.00 \$ 0.00 5d. Required repayments of retirement fund loans 5d. \$ 0.00 0.00 5e Insurance 5e. 0.00 0.00 **Domestic support obligations** 5f. 5f. 0.00 0.00 5g. **Union dues** 5g. 0.00 0.00 Other deductions. Specify: 5h.+ 0.00 0.00 Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. 0.00 0.00 Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. 0.00 0.00 List all other income regularly received: 8. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 0.00 0.00 8b. Interest and dividends 8b. 0.00 0.00 Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce 0.00 settlement, and property settlement. 8c. 0.00 8d. **Unemployment compensation** 8d. 0.00 0.00 8e. **Social Security** 8e. 1.490.00 0.00 Other government assistance that you regularly receive 8f. Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8f. Specify: 0.00 0.00 8g. 8g. Pension or retirement income \$ 0.00 0.00 Other monthly income. Specify: 8h.+ \$ \$ 0.00 0.00 Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. 1.490.00 0.00 10. Calculate monthly income. Add line 7 + line 9. 10. 1.490.00 0.00 1.490.00 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it 1,490.00 12. applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? No. Yes. Explain:

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Debtor 1   Robert Thomas	Fill	in this informa	ation to identify yo	our case:						
Delie Thomas   An amended filing							Che	ck if this is:		
Case number   If the continue   If the continu								•		
Case number (If known)    A separate filing for Debtor 2 because Debto 2 maintains a separate household    A separate filing for Debtor 2 because Debto 2 maintains a separate household   A separate filing for Debtor 2 because Debto 2 maintains a separate household   Schedule J: Your Expenses   12/18			Dollie Thoma	<u>as</u>						
Official Form B 6J Schedule J: Your Expenses  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.    Satt 3	United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS						MM / DD / YYYY			
Official Form B 6J Schedule J: Your Expenses  Bas complete and accurate a possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.  Part I: Describe Your Household  1. Is this a joint case?  No. Goto line 2  Yes. Debtor 2 live in a separate household?  Yes. Debtor 2 live in a separate Schedule J.  2. Do you have dependents?  Do not list Debtor 1 and Pyes.  Fill out this information for each dependent's relationship to Debtor 2 live with you?  Do not state the dependents names.  Granddaughter  7  No.  Granddaughter  7  Yes.  Granddaughter  7  No.  Daughter  29  Yes.  Daughter  29  No.  Daughter  29  No.  Daughter  29  No.  Daughter  29  Yes.  Daughter  29  Yes.  Same  No.  Daughter  29  Yes.  Same  No.  Daughter  29  Yes.  No.  Daughter  29  Yes.  No.  Daughter  29  Yes.  No.  Daughter  29  Yes.  Same  No.  Yes.  Same  No.  Yes.  Daughter  29  Yes.  No.  Daughter  29  Yes.  No.  Daughter  29  Yes.  No.  Daughter  29  Yes.  No.  No.  Daughter  29  Yes.  No.  Daughter  29  Yes.  No.  Yes.  An No.  Daughter  29  Yes.  No.  No.  Daughter  29  Yes.  No.  No.  Daughter  29  Yes.  No.  Yes.  An No.  Yes.  An No.  Daughter  29  Yes.  No.  No.  Daughter  29  Yes.  No.  No.  Yes.  An No.  Yes.  No.  Daughter  29  Yes.  No.  No.  No.  Daughter  29  Yes.  No.  No.  No.  No.  Daughter  29  Yes.  No.  No.  No.  No.  Daughter  29  Yes.  No.  No.  No.  No.  No.  No.  Daughter  29  Yes.  No.  No.  No.  No.  No.  Daughter  29  Yes.  No.  No.  No.  No.  No.  No.  No.  N	Cas	se number						A separate filing fo	r Debtor 2 because Debto	
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.    Part   Describe Your Household	(If k	nown)					_			
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.    Part   Describe Your Household	$\bigcirc$	fficial Fa	www.D.C.I							
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information, if more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.    Part 1				_ Exner	1808				12/1	
number (if known). Answer every question.    Answer every question.	Be	as complete	and accurate as	possible.	If two married people a				or supplying correct	
1. Is this a joint case?  No. Go to line 2.  Yes. Does Debtor 2 live in a separate household?  No Do not list Debtor 1 and Debtor 2.  Do not state the dependents? names.  Fill out this information for each dependent						form. On the top of any	/ additi	onal pages, write y	our name and case	
No. Go to line 2.  Yes. Does Debtor 2 live in a separate household?  No. Go to line 2.  Yes. Does Debtor 2 must file a separate Schedule J.  Do not list Debtor 1 and Debtor 2.  Do not state the dependents' names.  Granddaughter  Granddaughter  7  Yes.  Granddoughter  7  No.  Do not state the dependents' names.  Granddoughter  7  No.  Granddoughter  7  No.  Do no.  Grandson  9  Yes.  No.  Daughter  29  Yes.  No.  Daughter  29  Yes.  No.  Daughter  29  Yes.  Daughter  29  Yes.  Stimate Your Ongoing Monthly Expenses  Estimate Your Ongoing Monthly Expenses  Estimate your expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 61.)  Your expenses  850.00	_			hold						
Yes. Does Debtor 2 live in a separate household?    No	1.									
Po you have dependents? No Do not list Debtor 1 and Debtor 2 must file a separate Schedule J.  2. Do you have dependents? No Do not list Debtor 1 and Debtor 2.  Do not state the dependents' names.    Granddaughter   7   Yes					-t- hh1-10					
2. Do you have dependents?				n a separ	ate nousenoid?					
Do not list Debtor 1 and Debtor 2.  Do not state the dependent's names.    Fill out this information for each dependent		ΠY	es. Debtor 2 mus	st file a sep	parate Schedule J.					
Debtor 2.  Do not state the dependents names.  Granddaughter 7	2.	Do you hav	e dependents?	□ No						
Granddaughter 7			ebtor 1 and	■ Yes.			hip to			
Grandson 9 Yes No Grandson 10 Yes No Grandson 12 Yes No Daughter 29 Yes No Daughter 32 Yes No Daughter 32 Yes No No No No Daughter 32 Yes No No No No Daughter 32 Yes No No No No No Daughter 32 Yes Yes No						0		-		
Grandson 9 Yes No Onc Grandson 10 Yes Onc		dependents'	names.			Granddaughter				
Grandson  Daughter  Daughter  Daughter  Daughter  Daughter  Daughter  Daughter  Jess  No  Estimate Your Ongoing Monthly Expenses  Estimate your expenses as of your bankruptcy filling date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filled. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 61.)  The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  Solution  Your expenses  850.00						Granddaughter		7	_	
Grandson 9						Granadaginoi		- <del>'</del>		
Grandson 10 Yes No Daughter 29 Yes Daughter 32 Yes  3. Do your expenses include expenses of people other than yourself and your dependents?  Part 2: Estimate Your Ongoing Monthly Expenses  Estimate your expenses as of your bankruptcy filling date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 6I.)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.						Grandson		9	= '''	
Grandson  12  Yes  No  Daughter  29  Yes  No  Daughter  32  Yes  No  Daughter  32  Yes  No  Part 2: Estimate Your Ongoing Monthly Expenses  Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 6I.)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.								_	□ No	
Grandson  Daughter  Daught						Grandson		10	Yes	
Daughter  29  Yes  No  Daughter  32  Part 2: Estimate Your Ongoing Monthly Expenses  Estimate your expenses as of your bankruptcy filling date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 6I.)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  850.00								_		
Daughter 29						Grandson		12		
Daughter  Daughter  Daughter  32  Part 2: Estimate Your Ongoing Monthly Expenses  Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 6I.)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  4. \$ 850.00						<b>D</b> 14		00		
3. Do your expenses include expenses of people other than yourself and your dependents?  Part 2: Estimate Your Ongoing Monthly Expenses  Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 6I.)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  850.00						Daugnter				
3. Do your expenses include expenses of people other than yourself and your dependents?  Part 2: Estimate Your Ongoing Monthly Expenses  Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I</i> : Your Income (Official Form 6I.)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.						Daughter		32		
expenses of people other than yourself and your dependents?  Part 2: Estimate Your Ongoing Monthly Expenses  Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 6I.)  4. \$ 850.00	3.	Do your exp	penses include	_	No			_ <u></u>	<b>–</b> 165	
Part 2: Estimate Your Ongoing Monthly Expenses  Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 6I.)  4. \$		expenses o	f people other the	han $_{oldsymbol{\sqcap}}$						
Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 6I.)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  4. \$ 850.00		yoursell an	a your depende	nts: —						
expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 6I.)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  4. \$ 850.00										
the value of such assistance and have included it on Schedule I: Your Income (Official Form 6I.)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  4. \$ 850.00	exp	penses as of a	a date after the l							
the value of such assistance and have included it on Schedule I: Your Income (Official Form 6I.)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  4. \$ 850.00	Inc	lude expense	es paid for with I	non-cash	government assistance i	if you know				
payments and any rent for the ground or lot.  4. \$	the	value of suc	h assistance an	d have inc	cluded it on Schedule I:	Your Income		Your exp	enses	
If not included in line 4:	4.					Include first mortgage	4.	\$	850.00	
		If not include	ded in line 4:							
4a. Real estate taxes 4a. \$ 0.00		4a. Real	estate taxes				4a.	\$	0.00	

Official Form B 6J Schedule J: Your Expenses page 1

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Debtor 1 Debtor 2	Robert Thomas Dollie Thomas	Case number (if known)	
4b.	Property, homeowner's, or renter's insurance	4b. \$	0.00
4c.	Home maintenance, repair, and upkeep expenses	4c. \$	0.00
4d.	Homeowner's association or condominium dues	4d. \$	0.00
5. <b>Add</b>	itional mortgage payments for your residence, such as home equity loans	5. \$	0.00

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Deb	tor 1 Robert Thomas tor 2 Dollie Thomas	Case number (if known	
200	Donie monas	Case Hamber (II known	
6.	Utilities:	co ¢	200.00
	6a. Electricity, heat, natural gas	6a. \$ 6b. \$	300.00
	6b. Water, sewer, garbage collection	· —	228.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$ 6d. \$	50.00
7	6d. Other. Specify: Cable/internet	7. \$	89.00
7. 8.	Food and housekeeping supplies Childcare and children's education costs	8. \$	150.00
		9. \$	0.00
9.	Clothing, laundry, and dry cleaning	·	100.00
10.		10. \$	100.00
11.		11. \$	150.00
12.	<b>Transportation.</b> Include gas, maintenance, bus or train fare.	12. \$	250.00
13	Do not include car payments.  Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$	0.00
	Charitable contributions and religious donations	14. \$	0.00
	•	14. φ	0.00
13.	<b>Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a. \$	0.00
	15b. Health insurance	15b. \$	0.00
	15c. Vehicle insurance	15c. \$	34.00
	15d. Other insurance. Specify:	15d. \$	0.00
16	<b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20.		0.00
	Specify:	16. \$	0.00
17.	Installment or lease payments:	47- ¢	0.00
	17a. Car payments for Vehicle 1	17a. \$	0.00
	17b. Car payments for Vehicle 2	17b. \$	0.00
	17c. Other. Specify:	17c. \$	0.00
	17d. Other. Specify:	17d. \$	0.00
18.	Your payments of alimony, maintenance, and support that you did not report deducted from your new on line 5. School de 1. Your Income (Official Form 61)		0.00
19	deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 6l) Other payments you make to support others who do not live with you.	\$	0.00
10.	Specify:	19.	0.00
20	Other real property expenses not included in lines 4 or 5 of this form or on 5		•
_0.	20a. Mortgages on other property	20a. \$	0.00
	20b. Real estate taxes	20b. \$	0.00
	20c. Property, homeowner's, or renter's insurance	20c. \$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
	20e. Homeowner's association or condominium dues	20e. \$	0.00
21.		21. +\$	0.00
	• • •		
22.	Your monthly expenses. Add lines 4 through 21.	22. \$	2,301.00
00	The result is your monthly expenses.		
23.	Calculate your monthly net income.	22a ¢	4 400 00
	<ul><li>23a. Copy line 12 (your combined monthly income) from Schedule I.</li><li>23b. Copy your monthly expenses from line 22 above.</li></ul>	23a. \$ 23b\$	1,490.00
	25b. Copy your monthly expenses non-line 22 above.	23D\$	2,301.00
	23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c. <b>\$</b>	-811.00
24.	Do you expect an increase or decrease in your expenses within the year after For example, do you expect to finish paying for your car loan within the year or do you expect modification to the terms of your mortgage?  ■ No. □ Yes. □ Yes. Explain:	your mortgage payment to in	

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**B6 Declaration (Official Form 6 - Declaration).** (12/07)

Debert Themes

# **United States Bankruptcy Court Northern District of Illinois**

In re	Dollie Thomas		Case No.	
		Debtor(s)	Chapter	7

#### DECLARATION CONCERNING DEBTOR'S SCHEDULES

#### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of	27
sheets, and that they are true and correct to the best of my knowledge, information, and belief.	

Date	March 9, 2015	Signature	/s/ Robert Thomas
		_	Robert Thomas
			Debtor
Date	March 9, 2015	Signature	/s/ Dollie Thomas
	_		Dollie Thomas
			Joint Debtor

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

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B7 (Official Form 7) (04/13)

# United States Bankruptcy Court Northern District of Illinois

In re	Robert Thomas Dollie Thomas		Case No.	Case No.	
		Debtor(s)	Chapter	7	

# STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

#### 1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

#### 2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$4,470.00 2015 YTD: Debtor Estimated Income SSI \$17,880.00 2014: Debtor Estimated Income SSI \$17,880.00 2013: Debtor Estimated Income SSI Case 15-08196 Doc 1 Filed 03/09/15 Entered 03/09/15 12:45:41 Desc Main Document Page 38 of 54

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#### 3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR DATES OF PAYMENTS

AMOUNT PAID

AMOUNT STILL OWING

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225\*. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATES OF PAYMENTS/ TRANSFERS AMOUNT PAID OR VALUE OF TRANSFERS

AMOUNT STILL OWING

NAME AND ADDRESS OF CREDITOR

c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL OWING

4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER NATURE OF PROCEEDING COURT OR AGENCY AND LOCATION STATUS OR DISPOSITION

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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#### 5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER

DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

#### 6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN

NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER

DESCRIPTION AND VALUE OF

PROPERTY

### 7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR. IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

## 8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

#### 9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

Robert J. Semrad & Associates, LLC 20 S. Clark Street 28th Floor Chicago, IL 60603 DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR 2/17/15 AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY
\$1,000.00 (\$410.00 applied to
court costs and fees, \$590.00
applied to attorney fees).

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NAME AND ADDRESS OF PAYEE

Robert J. Semrad & Associates, LLC 20 S. Clark Street 28th Floor Chicago, IL 60603 DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR 3/3/15 AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY
\$140.00 applied to attorney
fees.

#### 10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

IN PROPERTY

#### 11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

#### 12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY

NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS DATE OF TRANSFER OR SURRENDER, IF ANY

# 13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

## 14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

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NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

#### 15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

#### 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

#### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL

SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which

the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

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#### 18. Nature, location and name of business

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN ADDRESS

NATURE OF BUSINESS

BEGINNING AND ENDING DATES

NAME

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

None

NAME ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

#### 19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

#### NAME AND ADDRESS

DATES SERVICES RENDERED

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME ADDRESS

DATES SERVICES RENDERED

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME ADDRESS

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS DATE ISSUED

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#### 20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY

(Specify cost, market or other basis)

None 1

b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

DATE OF INVENTORY

21. Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns,

controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME

None

**ADDRESS** 

DATE OF WITHDRAWAL

b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within one year

immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

 ${\bf 23}$  . Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT,

RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

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B7 (Official Form 7) (04/13)

8

#### 25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

\* \* \* \* \* \*

#### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date	March 9, 2015	Signature	/s/ Robert Thomas
	<del>-</del>	_	Robert Thomas
			Debtor
Data	March 9, 2015	Ciamatuma	/s/ Dollie Thomas
Date	Warch 9, 2013	Signature	
			Dollie Thomas
			Joint Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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B8 (Form 8) (12/08)

# United States Bankruptcy Court Northern District of Illinois

In re	Robert Thomas Dollie Thomas			Case No.	
III IC	Donie monas		Debtor(s)	Chapter	7
PART	CHAPTER 7 IN	f the estate. (Part A			
Proper	ty No. 1				
Credit	tor's Name: =-		Describe Property S	Securing Debt	:
_	ty will be (check one): Surrendered	☐ Retained			
	ning the property, I intend to (check Redeem the property Reaffirm the debt Other. Explain		oid lien using 11 U.S.C	C. § 522(f)).	
	ty is (check one): Claimed as Exempt	☐ Not claimed as exempt			
	<b>B</b> - Personal property subject to uneradditional pages if necessary.)	xpired leases. (All thre	ee columns of Part B mu	ust be complete	ed for each unexpired lease.
Proper	ty No. 1	7			
Lessor -NONE	r's Name: E-	Describe Leased P	roperty:	Lease will be U.S.C. § 365 ☐ YES	e Assumed pursuant to 11 (p)(2):
persona	re under penalty of perjury that th al property subject to an unexpired March 9, 2015		/ intention as to any property // // // // // // // // // // // // //	roperty of my	estate securing a debt and/or
Dec	Moreh 0 2015	G:	Debtor		
Date _	March 9, 2015	_ Signature	/s/ Dollie Thomas  Dollie Thomas		

Joint Debtor

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# United States Bankruptcy Court Northern District of Illinois

In re	Robert Thomas Dollie Thomas		Case No.			
		Debtor(s)	Chapter	7		
	DISCLOSURE OF COMPEN	NSATION OF ATTOR	NEY FOR DI	EBTOR(S)		
pa	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor and that compensation aid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on the behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:					
	For legal services, I have agreed to accept		\$	1,400.00		
	Prior to the filing of this statement I have received			730.00		
	Balance Due		\$	670.00		
2. T	The source of the compensation paid to me was:					
	■ Debtor □ Other (specify):					
3. T	The source of compensation to be paid to me is:					
	■ Debtor □ Other (specify):					
4. ■	I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.					
	☐ I have agreed to share the above-disclosed compensations of the agreement, together with a list of the name					
5. Iı	n return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:					
b.	<ul> <li>Analysis of the debtor's financial situation, and rende</li> <li>Preparation and filing of any petition, schedules, state</li> <li>Representation of the debtor at the meeting of credito</li> <li>[Other provisions as needed]</li> </ul>	ement of affairs and plan which i	may be required;			
6. B	By agreement with the debtor(s), the above-disclosed fee	does not include the following s	service:			
		CERTIFICATION				
	certify that the foregoing is a complete statement of any ankruptcy proceeding.	agreement or arrangement for p	payment to me for r	epresentation of the debtor(s) in		
Dated:	: March 9, 2015	/s/ Joseph Weiler				
		Joseph Weiler 630 Robert J. Semrad 20 S. Clark Street		.c		
		28th Floor Chicago, IL 60603				
		(312) 913 0625 Fa				
		rsemrad@robertjs	emrad.com			

# **CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE**

I do hereby retain the law firm of ROBERT J. SEMRAD & ASSOCIATES, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I agree to pay Robert J. Semrad & Associates \$1,400.00 in attorney fees plus costs in the amount of \$410.00 to represent my interests in the preparation and filing of my Chapter 7 Petition and Schedules; preparation and attendance of the Section 341 Meeting of Creditors; review of any redemption agreements; review of any reaffirmation agreements; and case administration and monitoring. I further understand and agree that additional professional legal services will result in fees that are due ROBERT J. SEMRAD & ASSOCIATES, LLC. Some of the additional services and fees are as follows:

Representing Client in Adversary Proceeding. \$300.00/hr.

Adding additional bills \$50.00

Motion to Reopen and Avoid Lien \$1000.00

Motion to Reopen \$350.00 + court costs

I understand that these fees must be paid before such work will be completed. I acknowledge and agree that as the above additional fees constitute post-petition services, they are not dischargeable in my Chapter 7 case.

I also understand that, unless otherwise agreed, my Chapter 7 bankruptcy case will not be filed until I pay the attorney fees in full. As Robert J. Semrad & Associates will begin to work on my file immediately after entering into this contract, I understand that any and all funds paid are not refundable.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay the balance of any unpaid fees to Robert J. Semrad and Associates LLC. Any fees owing to Robert J. Semrad & Associates and not paid as of the filing of the bankruptcy may be discharged in the bankruptcy and may not be collected by Robert J. Semrad & Associates LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay unpaid fees for the remainder of my representation in consideration of services to be performed by Robert J. Semrad & Associates after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, Robert J. Semrad & Associates LLC reserves the right to withdraw representation in the event that I do not sign a second retainer after filing my case promising to pay said fees or in the event that I do not pay said fees.

I understand that any funds that I am tendering to Robert J. Semrad & Associates, LLC as part of this **advance payment retainer** shall immediately become the property of Robert J. Semrad & Associates, LLC in exchange for a commitment by Robert J. Semrad & Associates, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by Robert J. Semrad & Associates, LLC and will be used for general expenses of the firm. I further understand that it is ordinarily my option to deposit funds with an attorney

Robert D. Thomas Matter Number 431171-001

itial: XT KDT.
3/9/15 3/9/15

that shall remain my property as security for future services. However, Robert J. Semrad & Associates, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy case requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while others may be only ministerial in nature. I further understand that the benefit that I am receiving under this fee arrangement is the commitment of Robert J. Semrad & Associates, LLC to perform any and all work reasonably necessary to file my case absent any extraordinary circumstances.

As ROBERT J. SEMRAD & ASSOCIATES, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with ROBERT J. SEMRAD & ASSOCIATES, LLC. This includes, but is not limited to, providing ROBERT J. SEMRAD & ASSOCIATES, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that ROBERT J. SEMRAD & ASSOCIATES, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.\*

I also understand that, if I am refiling a case with ROBERT J. SEMRAD & ASSOCIATES, and an audit of the previous case(s) indicate that remaining attorney fees are owed, any initial funds I pay to refile will first be applied to the balance owed on the previous case(s). If client breaches this agreement, client will be responsible for all costs associated with enforcing the terms of this contract including but not limited to court costs and attorney fees.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by ROBERT J. SEMRAD & ASSOCIATES,

LLC or an agent thereof.

Date: 3**/3**/15

Attorney

\*DISCLAIMER

The creditors listed in your bankruptcy petition will receive notice of your bankruptcy filing from the Clerk of the United States Bankruptcy Court. Please be advised that it will be several days before these creditors receive the notice. Therefore, if you are concerned about a particular creditor taking immediate action against you, contact this creditor directly and provide the creditor with a copy of your Notice of Bankruptcy Filing. This is especially important if you are at risk of having you vehicle repossessed, real estate foreclosed, or wages garnished.

Robert D. Thomas Matter Number 431171-001

Initial: X 3/9/15

# UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

# NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

# 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

## 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

### Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total Fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

# <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total Fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the

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Form B 201A, Notice to Consumer Debtor(s)

Page 2

Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

### Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total Fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

# Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total Fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

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B 201B (Form 201B) (12/09)

# **United States Bankruptcy Court Northern District of Illinois**

		1 (01 11101 11 2 1811 101 01 11111 018		
In re	Robert Thomas Dollie Thomas		Case No.	
		Debtor(s)	Chapter 7	
		N OF NOTICE TO CONSUM 42(b) OF THE BANKRUPT	`	5)
0.1.	I (We), the debtor(s), affirm that I (we) h	Certification of Debtor ave received and read the attached no	otice, as required by	§ 342(b) of the Bankruptcy
Code.				
	t Thomas Thomas	X /s/ Robert Tho	mas	March 9, 2015
Printed	d Name(s) of Debtor(s)	Signature of De	ebtor	Date
Case N	No. (if known)	X /s/ Dollie Thon	nas	March 9, 2015
		Signature of Jo	int Debtor (if any)	Date

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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# United States Bankruptcy Court Northern District of Illinois

In re	Robert Thomas Dollie Thomas		Case No.	
		Debtor(s)	Chapter	7
	VERIF	TICATION OF CREDITOR M	ATRIX	
		Number of	Creditors: _	58
	The above-named Debtor(s) here (our) knowledge.	eby verifies that the list of credite	ors is true and	correct to the best of my
Date:	March 9, 2015	/s/ Robert Thomas		
		Robert Thomas		
		Signature of Debtor		
Date:	March 9, 2015	/s/ Dollie Thomas		
		Dollie Thomas		
		Signature of Debtor		

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Joliet, IL 60436	101 Hodencamp Rd Ste 120 Thousand Oaks, CA 91360	Kankakee, IL 60901
Atg Credit 1700 W Cortland St Ste 2 Chicago, IL 60622	Commonwealth Edison 3 Lincoln Center 4th Floor Attn Bankruptcy Section	Credtrs Coll Po Box 63 Kankakee, IL 60901
	Oakbrook Terrace, IL 60181	
Atg Credit 1700 W Cortland St Ste 2 Chicago, IL 60622	Credit Management Lp 4200 International Pkwy Carrollton, TX 75007	Credtrs Coll Po Box 63 Kankakee, IL 60901
Atg Credit 1700 W Cortland St Ste 2 Chicago, IL 60622	Credtrs Coll Po Box 63 Kankakee, IL 60901	Credtrs Coll Po Box 63 Kankakee, IL 60901
Cda/pontiac Attn:Bankruptcy Po Box 213	Credtrs Coll Po Box 63 Kankakee, IL 60901	Credtrs Coll Po Box 63 Kankakee, IL 60901
Streator, IL 61364		
Cda/pontiac Attn:Bankruptcy Po Box 213	Credtrs Coll Po Box 63 Kankakee, IL 60901	Credtrs Coll Po Box 63 Kankakee, IL 60901
Streator, IL 61364		
Cda/pontiac Attn:Bankruptcy Po Box 213	Credtrs Coll Po Box 63 Kankakee, IL 60901	Credtrs Coll Po Box 63 Kankakee, IL 60901
Streator, IL 61364		
Cda/pontiac Attn:Bankruptcy Po Box 213	Credtrs Coll Po Box 63 Kankakee, IL 60901	Credtrs Coll Po Box 63 Kankakee, IL 60901
Streator, IL 61364  Cda/pontiac	Credtrs Coll	Credtrs Coll
Attn:Bankruptcy Po Box 213 Streator, IL 61364	Po Box 63 Kankakee, IL 60901	Po Box 63 Kankakee, IL 60901
Cda/pontiac	Credtrs Coll	Credtrs Coll
Attn:Bankruptcy Po Box 213 Streator, IL 61364	Po Box 63 Kankakee, IL 60901	Po Box 63 Kankakee, IL 60901

Credtrs Coddse 15-08196 Doc 1 Poddse 15-08196 Poddse Poddse Page 54 of 54 Dark Ridge, IL 60068 La Porte, IN 46350 Credtrs Coll Med Business Bureau Vision Financial Servi Po Box 63 Po Box 1219 1900 W Severs Rd Kankakee, IL 60901 Park Ridge, IL 60068 La Porte, IN 46350 Credtrs Coll Med Business Bureau World Acceptance Corpora Po Box 63 Po Box 1219 2637 S. Cooper St Kankakee, IL 60901 Park Ridge, IL 60068 Arlington, TX 76015 Credtrs Coll Med Business Bureau World Finance Corp Po Box 63 Po Box 1219 1591 Sycamore Rd Kankakee, IL 60901 Park Ridge, IL 60068 Yorkville, IL 60560 Credtrs Coll Med Business Bureau World Finance Corp Po Box 63 Po Box 1219 1591 Sycamore Rd Kankakee, IL 60901 Park Ridge, IL 60068 Yorkville, IL 60560 Credtrs Coll Midwest Hospitals LLC World Finance Corp Po Box 63 2100 Glennwood Ave 1591 Sycamore Rd Kankakee, IL 60901 Joliet, IL 60435 Yorkville, IL 60560 Dr. Udit V Patel National Recovery Agen World Finance Corp 744 Essington Rd 2491 Paxton St 1591 Sycamore Rd Joliet, IL 60435 Harrisburg, PA 17111 Yorkville, IL 60560 Fst Premier Nicor World Finance Corporatio 3820 N Louise Ave P.O. Box 2020 1591 sycamore Rd Sioux Falls, SD 57107 Aurora, IL 60507 Yorkville, IL 60560 Hinsdale Orthopaedics Pellettieri
PO Box 5461 991 Oak Creek Dr
Carol Stream, IL 60197 Lombard, IL 60148

Illinois Collection Service/ICSsion Financial Servi Illinois Collection Service 1900 W Severs Rd Po Box 1010 La Porte, IN 46350 Tinley Park, IL 60477